FOODS, Rev 9/09

STATE OF CONNECTICUT DEPARTMENT OF CONSUMER PROTECTION

FOOD & STANDARDS DIVISION

Telephone: (860) 713-6160 Email: food.standards@ct.gov Web Site: www.ct.gov/dcp



For Official Use Only	

BOTH

APPLE JUICE

APPLICATION FOR LICENSE

BEVERAGE

WATER

BOTH

INSTRUCTIONS: All spaces must be completed - please print or type. This application **must be accompanied by a check or money order for** the appropriate fee as listed below, made payable to: "Treasurer, State of CT." Application fees are non-refundable. → Return your completed application and fee to: Department of Consumer Protection, License Services Division, 165 Capitol Avenue, Hartford, CT 06106 **Bakery License** Wholesale License to **Apple Juice & Cider** Fee: (Based on *Number of Production Workers) Manufacture Frozen Manufacturer and 1 - 4 = \$20.00**Desserts Bottler License** 5 - 9 = 8 40.00Fee: Fee: \$20.00 10 - 24 = 8100.00\$100.00 for the first 25.000 25 - 99 = 8 200.00gallons or fraction thereof, plus Water & Non-Alcoholic 100 + = \$250.00**\$1.50** per thousand or fraction **Beverage Manufacturer** *Number of production workers is defined per and Bottler License CT General Statute 21a-152 as "...the number **Vending Machine Operator Application & Initial** of persons engaged in the production of bread License License Fee: \$300.00 and pastry products, excluding porters, **Fee:** (Based on # of Machines) You must submit with this dishwashers, drivers, sales personnel and other 1 - 3 = \$40.00application: employees not directly engaged in such 4 - 50 = \$100.001) a current sanitation inspection production." You must submit a current 51 - 100 = \$200.00report of bottling facility sanitation inspection report of bakery with this **101 or More = \$200.00** for Each 100 2) water analysis & laboratory application. reports Machines or Fraction Thereof **Retail License to Manufacture** Frozen Desserts Fee: \$50.00 Business Trade Name (dba) Business Street Address (Location of Business) City State Zip Code Telephone Number (with area code) FEIN Previous License Number (if applicable) Corporation Name (If Applicable) Mailing Address (if different than above) Street Address City State Zip Code Applicant's Name Applicant's Title VENDING MACHINE WHOLESALE FROZEN DESSERT **BAKERY applicants:** MANUFACTURER applicants: **OPERATOR** applicants: NUMBER OF NUMBER OF GALLONS: PRODUCTION WORKERS: NUMBER OF MACHINES: WATER & NON-ALCOHOLIC BEVERAGE APPLE JUICE & CIDER **MANUFACTURER AND BOTTLER applicants: MANUFACTURER AND BOTTLER applicants:**

CIDER

FOR VENDING MACHINE OPERATOR APPLICANTS ONLY:

ADDEGGE OF THE				
ADDRESSES OF LO	CATIONS WHERE FOODS, I	BEVERAGES OR SUPPLIES ARE PR	EPARED OR STORED	
SUMMARY OF VENDING MACHINES OPERATED, SERVICED OR REPLENISHED				
PRODUCT DISPENSED	NUMBER OF MACHINE OPERATED		PACKAGED	
HOT BEVERAGES	OLEKALED			
SOFT DRINKS IN CUPS				
BAKERY PRODUCTS				
DAIRY PRODUCTS				
ICE CREAM				
CANDY, NUTS, GUM				
POTENTIALLY HAZARDOU	S			
FOODS OTHER				
		ORTATION OF FOOD, BEVERAGES		
MAKE	MODEL	YEAR	BODY STYLE	
I subscribe and affirm under the populties of nations, that the statements and in this small of the land				
I subscribe and affirm under the penalties of perjury, that the statements made in this application have been examined by me and to the best of my knowledge and belief are true and correct.				
2.2. mg - 2.2. 1.2. 1.2. 1.2. 1.2. 1.2. 1.2. 1.				
Signature of Applicant				
Signature of Applicant Date				
FOR OFFICIAL USE ONLY				
INSPECTION DATE:	INSPECTED BY:	APPROVED BY:	APPROVAL DATE:	
FEE DUE:	FEE COLLECTED:	CHECK OR MONEY ORDER #:	TOWN TAX CODE:	
RENEWAL NEW APPLICATION APPLICATION	LICENSE YEAR:	EFFECTIVE DATE:	EXPIRATION DATE:	